

Division of Laboratory Services 630 Hart Lane Nashville, TN 37216 615-262-6300

https://www.tn.gov/health/health-program-areas/lab.html

Disease/Agent Suspected or Test Requested:

Listeria species

Provider Requirements	 Isolate submission REQUIRED. FOOD OUTBREAK - Contact <u>CEDEP</u> if a foodborne outbreak is suspected
Acceptable Specimen Sources/Type(s) for Submission	Culture isolate from normally sterile site
TDH Requisition Form Number	PH-4182 clinical sample
Media Requirements	Non-selective media slant: TSA, Chocolate, Blood
Special Instructions	
Shipping Instructions	CLINICAL SAMPLE - Room Temperature/Ambient
Laboratory Section Performing Testing	Bacteriology
Lab Location(s) Performing Test	Nashville

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).